

Interim Designation of Agent to Receive Notification
of Claimed Infringement

Full Legal Name of Service Provider : Imagware, Inc.

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business) : _____

Address of Service Provider: 6441 Enterprise Lane, Suite 115, Madison, WI 53719

Name of Agent Designated to Receive
Notification of Claimed Infringement : Thomas Tongue

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

6441 Enterprise Lane, Suite 115
Madison, WI 53719

Telephone Number of Designated Agent : 608-271-2711

Facsimile Number of Designated Agent : 608-271-8419

Email Address of Designated Agent : support@imagware.com

Signature of Officer or Representative of the Designating Service Provider:

Date: 2/16/99

Typed or Printed Name and Title: Brian W. Casey, Vice President

Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee
Made Payable to the Register of Copyrights.

RECEIVED

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